Canola and Rapeseed Commission				Established in 1998			
1. Group Name			2. Nan	ne group reported under in 1999	or Unchanged 🗵		
Department of Agriculture	,	1	998	8	8		
3. Agency to which group r	eports		r was group blished	5. Number of members	6. Number of meetings last biennium		
7. Summary: Primary Resp	onsibilities:						
				sing, sales, and promotion to grades and standards, and dis			
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation		
1999-2001 Biennium Group Program	\$2,600 \$14,000	\$2,428 0	\$5,028 \$14,000	Producer assessments/N			
2001-2003 Biennium Group Program	\$3,000 \$35,000	\$2,578 \$5,000	\$5,578 \$40,000	Producer assessments/N			
52. Expected consequence transferred to another ag	es if group were gency (specify),	e abolished and res or c) were dropped	sponsibilities: a	a) were assigned to existing/add	ditional staff, b) were		
a) Producer interest would decline; assessment collection would decline. This is an agricultural program and should not be transferred. This is an agricultural program and should not be transferred. Solution of canola/rapeseed in the state would decline.							
10. Legal authorization: S	tate Constitutio	n Article, RCW, WA	AC or EO	11. Legal Authorization is	s:		
RCW 15.65 and WAG	C 16-573			⊠ Specific ☐ Gener	al		
12. Appointing Authority: appointed by the elected Agriculture				13. Is Senate confirmation re	quired? 🗌 Yes 🔀 No		
14. Does group have subpo	pena powers?	Yes 🗌 No 1	5. Group memb	per compensation class one	⊠ two ☐ three ☐ four		
16. Required Representation	on:						
District II: Counties of District III: Counties o One handler appointed	Ferry, Pend O f Asotin, Colum d by the elected	reille, Spokane, ar bia, Garfield, Wal d producers.	nd Stevens: tw la Walla, and '	itat, Lincoln, and Yakima: two no members. Whitman: two members department and the public.	members		
17. Federal or other mand PL 104-127, Title V,				existing organizations state, loo the mandates listed in number			
19. Certification: I hereby knowledge.	certify via electro	onic submittal that	the above infor	mation is complete and correct t	to the best of my		
Wendy Peay, Executive S Name and Title	Secretary	7/31/01 Date	PO B	ox 4381, Pasco, WA 99302	(509) 547-5538 Phone		

Capitol Campus Design	gn Advisory (Committee				
1. Group Name			2. Nam	e group reported under in 199	99 or Unchanged 🛚	
State Capitol Committee a	and Director of	GA	1990	9	5	
3. Agency to which group r	eports		r was group blished	5. Number of members	6. Number of meetings last biennium	
7. Summary: Primary Resp Advisory group to review recommendations that	w programs, pla	anning, design an	d landscaping	of state capitol facilities and and environmental excellen	grounds, and to make	
maintenance of capitol						
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation	
1999-2001 Biennium Group	6,300	56,900	63,200	Direct: 414, Indirect: 036,	Direct: 050,05100	
Program				289, 057	Indirect: various	
2001-2003 Biennium Group	5,300	50,100	55,400	Direct: 422, Indirect:	Direct: 050,05100	
Program			Direct: 422, Indirect: 036, 289 or 057	Indirect: 036, 289, 057	Indirect: various	
a) Expertise that is proprofessional members leadership provided legislative members not be available to the Capitol Committee of Director for decision the campus and loc communities. 10. Legal authorization: Service Serv	ership and by ship, would he State or GA is affecting al tate Constitution 34:080, WAC 2	GA is respondent of the computation of the computat		from the capitol serve are find from the capitol serve are function as direct later december of the capitol state capitol would be increased. Capitol state capitol sta	is:	
12. Appointing Authority: 014. Does group have subpo				13. Is Senate confirmation re	-	
Does group have subpo	Della homeis!] 169 ⊠ MO 1	J. Group memb	ei compensation class 🖂 on		
16. Required Representation	on:					
Two architects, a lands members of the Senat			anner; Two me	mbers of the House, one fro	m each caucus, and two	
17. Federal or other mand None	ates:			xisting organizations state, lo the mandates listed in numbe		
19. Certification: I hereby of knowledge.	certify via electro	onic submittal that	the above inforn	nation is complete and correct	to the best of my	
Lenore Miller		June 21, 20	001 Gener	al Adminstration, PO 41019	902-0970	
Name and Title		Date	Addre	ss	Phone	

Capitol Lake Adaptive Management Plan (CLAMP) 1. Group Name 2. Name group reported under in 1999 or Unchanged General Administration 1997 9 40 3. Agency to which group reports 4. Year was group 5. Number of 6. Number of meetings established last biennium members 7. Summary: Primary Responsibilities: To provide guidance to DGA on the development of a management plan for the operation, maintenance, and capital investments associated with Capitol Lake. **Direct Costs** 8. Estimated Operating Costs **Indirect Costs Total Costs** Sources of Funds **Program Appropriation** Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated 60 80,640 80,700 A19,93701 057 1999-2001 Biennium Program 60 30.140 30.200 057 E40,95102 Group 2001-2003 Biennium Program 54. Expected consequences if group were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped. Inability to find solutions for WDNR has part ownership of lake a) c) No responsible management of effective lake management state and potential risks to the practices that regulatory environment or to local agencies, tribe or local community. government will support. 10. Legal authorization: State Constitution Article, RCW, WAC or EO 11. Legal Authorization is: □ Specific □ General None 12. Appointing Authority: Director of General Administration 13. Is Senate confirmation required? ☐ Yes ☒ No 14. Does group have subpoena powers? ☐ Yes ☒ No 15. Group member compensation class ⊠ one ☐ two ☐ three ☐ four 16. Required Representation: Representatives from nine state, local, and tribal governments/agencies with permit authority over lake activies. 17. Federal or other mandates: 63. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: None N/A 19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge. Lenore Miller June 21, 2001 General Adminstration, PO 41019 902-0970 Name and Title Address

Cascadia Community District 30	College-Boa	ard of Trustees,	, 			
1. Group Name			2. Nam	e group reported under in 199	9 or Unchanged ⊠	
State Board for Communi Colleges	ty & Technicial		1994	5	26	
3. Agency to which group r		r was group ablished	5. Number of members	6. Number of meetings last biennium		
7. Summary: Primary Resp	oonsibilities:					
basis. The Board is res	sponsible for his College District	ring the CEO/Pres 30. The Board, a	sident, granting although kept in	ch, appointed by the Governo tenure to all full-time faculty formed of all operations, del	, and for developing the	
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation	
1999-2001 Biennium Group Program	27,500		27,500	G.F. State/A		
2001-2003 Biennium Group Program	27,500		27,500	G.F. State/A		
55. Expected consequence transferred to another ag) were assigned to existing/ad	lditional staff, b) were	
 Citizen representation governance of publication would be eliminated 	c colleges		BCTC - but con ion would be lo		s (a) and (b)	
10. Legal authorization: S	tate Constitutio	n Article, RCW, WA	AC or EO	11. Legal Authorization i	s:	
RCW 28B.50.140				⊠ Specific ☐ Gene	ral	
12. Appointing Authority:	Governor			13. Is Senate confirmation re	equired? 🛛 Yes 🔲 No	
14. Does group have subpo	oena powers?	Yes No 1	5. Group memb	er compensation class 🛛 one	e 🗌 two 🗌 three 🔲 four	
16. Required Representation	on:					
	of the Board of			e District; not an employee of r a member of the governing		
17. Federal or other mand None	None 64. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: None					
19. Certification: I hereby of knowledge.	certify via electro	onic submittal that	the above inforr	nation is complete and correct	to the best of my	
Dr. Victoria Muñoz Richar	t, President	7/2/01		5 Campus Way N.E. II, WA 98011	425.352.8810	
Name and Title		Date	Addre		Phone	

Cedar Creek Correction	ons Center (Community Adv	visory		
1. Group Name				2. Name group reported ur	nder in 1999 or Unchanged 🛚
Department of Corrections	S		1995	7	7
3. Agency to which group r	eports		ar was group ablished	5. Number of members	6. Number of meetings last biennium
7. Summary: Primary Resp	oonsibilities:				
The primary responsibility with the local communit		ittee is to enhance	e communica	ations and to establish and r	naintain a strong relationship
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropor N if non appropriated	Program Appropriation
1999-2001 Biennium Group Program	-0-	-0-	-0-		
2001-2003 Biennium Group Program	-0-	-0-	-0-		
a) There are no similar available.	gency (specify) r resources	, or c) were droppe b) There are available.	ed. no similar re	cont	facility would lose valuable act and coordination with the munity.
10. Legal authorization: S			AC or EO	11. Legal Authorizat	
RCW 72.09.050 (Sec	cretary's Autho	rity)		☐ Specific ⊠ G	General
12. Appointing Authority:	Secretary, Dep	partment of Correct	ctions	13. Is Senate confirmation	on required? 🗌 Yes 🗵 No
14. Does group have subpo	oena powers? [☐ Yes ⊠ No	15. Group me	mber compensation class $oxtime 2$	one 🗌 two 🗌 three 🗌 four
16. Required Representation Local community mem					
17. Federal or other mand	ates:				e, local or private, which could
None.			sati: Nor	sfy the mandates listed in nu	mber 17:
			INOI	ie.	
19. Certification: I hereby of knowledge.	certify via electr	ronic submittal that	t the above in	formation is complete and cor	rect to the best of my
Patria Robinson-Martin, D		nment July (Post Office Box 41101, Olyn Washington 98504-1101	npia, (360) 753-0896
Name and Title	. ,	Date		Address	Phone

Cemetery Board						
1. Group Name			2. Nam	ne group reported under in 199	9 or Unchanged ⊠	
Department of Licensing			1953	6	4	
3. Agency to which group r	eports		r was group Iblished	5. Number of members	6. Number of meetings last biennium	
7. Summary: Primary Resp	onsibilities:					
Administers the provision	ons of RCW 68 ition of cremate	ed remains, exam	ine endowmen	tery authorities, prearrangem it care and prearrangement ti		
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation	
1999-2001 Biennium Group	7,010			Cemetery Account		
Program	135,284	66,966	209,259		209,259	
2001-2003 Biennium Group	7,500			Cemetery Account		
Program	152,512	51,901	212,913		212,913	
57. Expected consequence transferred to another ag	es if group were ency (specify),	e abolished and res or c) were dropped	sponsibilities: a d.) were assigned to existing/ad	ditional staff, b) were	
expertise relating to	a) Loss of board knowledge and expertise relating to the standards of the profession b) same as in (a) c) Loss of public protection related to standards of the profession and protection of public trust funds					
10. Legal authorization: St	tate Constitution	n Article, RCW, WA	AC or EO	11. Legal Authorization i	s:	
-				Specific Gene	ral	
12. Appointing Authority: (Governor			13. Is Senate confirmation re	oquired? Tyes No	
14. Does group have subpo		Yes No 1	5. Group memb	er compensation class one	-	
	-					
16. Required Representatio		norgana who have	o had avpariar	age in this state in the active	administrativo	
management of a cem persons who have lega	etery authority al, accounting o	or as a member or other profession	of the board of nal experience	nce in this state in the active a directors thereof. Tow memb, which relates to the duties of have a financial interest in the	pers of the board shall be of the board. The sixth	
17. Federal or other mand	ates:			existing organizations state, lo		
None			satisfy	the mandates listed in number	17:	
19. Certification: I hereby of knowledge.	certify via electro	onic submittal that	the above infor	mation is complete and correct	to the best of my	
Jon Donnellan, Administra				Olympia, WA 98507-9012	360-664-1528	
Name and Title	Dat	Δ Λ	ddroce		Phone	

Centralia Community District 12	College-Boa	rd of Trustees	Uncha	Unchanged			
1. Group Name			2. Nam	ne group reported under in 19	99 or Unchanged ⊠		
State Board for Communit Colleges	ty and Technica	al 	1967	5	23		
3. Agency to which group r	eports		r was group blished	5. Number of members	6. Number of meetings last biennium		
7. Summary: Primary Resp	onsibilities:						
government of commun not inconsistent with law	ity colleges, sto v or rules and r	udents and teache egulations of the S	ers, and promu State Board for	for Community and Technic lgate such rules and regula r Community and Technical ministration of the college di	tions and perform all acts Colleges as the board of		
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation		
1999-2001 Biennium Group Program	\$48,790		\$48,790	G.F. State (A)			
2001-2003 Biennium Group Program	\$49,606		\$49,606	G.F. State (A)			
58. Expected consequenc transferred to another ag	es if group were jency (specify),	e abolished and res or c) were dropped	sponsibilities: a I.	n) were assigned to existing/a	dditional staff, b) were		
a) Result in lack of con input	nmunity	b) Result in lac	ck of communi	ty input c) Could r state la	not function under existing		
10. Legal authorization: Se	tate Constitution	n Article, RCW, WA	C or EO	11. Legal Authorization	is:		
RCW 28B.50.140				⊠ Specific ☐ Gen	eral		
12. Appointing Authority:	Governor			13. Is Senate confirmation	required? 🛛 Yes 🗌 No		
14. Does group have subpo	ena powers?] Yes ⊠ No 1	5. Group memb	er compensation class 🛛 or	ne 🗌 two 🔲 three 🗌 four		
16. Required Representation	n:						
Each trustee shall be a	a resident and	qualified elector of	his communit	y college district (RCW 28B	.50.100)		
17. Federal or other mandates: None 67. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: None							
19. Certification: I hereby of knowledge.	certify via electro	onic submittal that	the above infori	mation is complete and correc	et to the best of my		
Dr. Henry P. Kirk, Preside	nt	July 10, 200		Vest Locust alia, WA 98531	360/735-9391		
Name and Title		Date	Addre		Phone		

Central Puget Sound (Hearings Board	Growth Mana	agement				
1. Group Name			2. Name	e group reported un	der in 199	9 or Unchanged 🛚
N/A Quasi-Judicial Agency 1992			3	4 Jo pre h	regular Board meetings; bint Boards meetings; 40 hearing conferences; 30 hearings on merits; 25 compliance hearings	
3. Agency to which group re	eports	4. Year was grouestablished	ıp	5. Number of members	6. N	umber of meetings last iennium
7. Summary: Primary Responsibilities: The Central Puget Sound Growth Management Hearings Board operates as, in effect, a specialized land use court. It hears and decides upon appeals that allege that a city or county has not complied with the Growth Management Act, the Shoreline Management Act or the State Environmental Policy Act as to GMA and SMA actions. There are four counties and 80 cities in the Central Puget Sound region that are required by the GMA to adopt comprehensive plans, land use regulations, and capital facilities programs. All 84 jurisdictions are required to review and update their plans as appropria by September of 2002. 						Management Act, the ere are four counties sive plans, land use eir plans as appropriate
The Board holds qua groups and the general				The Board also pro	vides out	reach to stakeholder
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Fund Enter fund sources, e.g., G.F. S appropriated or N if non appropri	tate/A if	Program Appropriation
1999-2001 Biennium Group Program			\$934,000	G.F. State G.F. State	atou	
2001-2003 Biennium Group Program			\$970,000	G.F. State G.F. State		
59. Expected consequence transferred to another ag) were assigned to e	xisting/ad	ditional staff, b) were
a) Loss of expertise an would result from as these responsibilities Board members hav of experience with logovernment planning	d credibility signing s to staff. re 50+ years ocal	knowledge of precedent. as DOE, SH region-spec	onal focus and of GMA case la State-wide age IB or OCD lack ific or subject n ne GMA require	aw encies such a the natter	dockets, importan the GMA	rorkload on civil court delays in answering t questions interpreting and SMA, higher costs etitioners and courts.
10. Legal authorization: St RCW 36.70A, RCW 4			C or EO	11. Legal Autho ⊠ Specific		
12. Appointing Authority: (Governor			13. Is Senate confir	mation re	quired? 🗌 Yes 🗵 No
14. Does group have subpo	ena powers? 🗵	Yes No 15	5. Group membe	er compensation cla	ss $oxtimes$ one	two three four
16. Required Representatio 1. At least one member 2. At least one member 3. No more than two results 4. No more than two results 1.	er must be an a er must have b nembers shall	een an elected cit be members of the	e same politica			
17. Federal or other manda None		reside in the same	68. Other ex	xisting organizations the mandates listed		cal or private, which could 17:
19. Certification: I hereby of	ertify via electro	onic submittal that t		nation is complete ar	d correct	to the best of my
knowledge. Joseph Tovar, Administrat	tive Chairman	July 6, 2001	1215 Fourt	th Ave., Ste. 322, S	eattle 981	206.389.2625
Name and Title	nerson assume	Date	Address	smittal of the above	informati	Phone
(11115)	Jordon assume	a reaportaininty 101	i accurate traffi	טוווונמו טו נווכ מטטעפ	mioniali	011)

Central Washington U	Iniversity, Bo	oard of Trustees	S			
1. Group Name			2.	Name group reported under in	1999 or Unchanged ⊠	
Governor			1890	8	30	
3. Agency to which group r	eports		was group blished	5. Number of members	6. Number of meetings last biennium	
7. Summary: Primary Resp	onsibilities:					
prescribes courses of st determined to be neces other property needed f maintains self-support for university, as provided I	tudy; established sary; acquires or the operation acilities in the roy law; received istribution of sa	es organizational s real and other pro n or maintenance manner prescribed s gifts, grants, con ame; offers new de	tructure of the perty; purchas of the universit in statute; ent veyances, dev grees and/or of	If the institution; with assistan university; establishes and e es supplies and purchases or ty; establishes, leases, opera ers into such contracts deem rises, and bequests of real or off-campus programs as appr	rects new facilities as r leases equipment and tes, equips, and ed essential to the personal property, and	
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation	
1999-2001 Biennium Group	14,945	26,043	40,987	General Fund, State A		
Program	2,300	27,535	29,835			
2001-2003 Biennium Group Program	15,692 2,414	27,344 30,320	43,036 32,734	General Fund, State A		
60. Expected consequenc transferred to another ag) were assigned to existing/add	ditional staff, b) were	
a) Loss of oversight of trust place in the ins		•	consiveness to reased costs		n could not exist as it onstituted.	
10. Legal authorization: St	tate Constitutio	n Article, RCW, WA	C or EO	11. Legal Authorization is	s:	
RCW 28B.35 and Titl	e 106 WAC			Specific ☐ Gener	al	
12. Appointing Authority:	Governor			13. Is Senate confirmation re	quired? 🗌 Yes 🔲 No	
14. Does group have subpoena powers? Yes No 15. Group member compensation class one two three four five						
16. Required Representation	n:					
17. Federal or other mandates: none 69. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: none						
19. Certification: I hereby of knowledge.	certify via electro	onic submittal that t	he above inforn	nation is complete and correct	to the best of my	
Judy B. Miller, Adm Asst/E the President and Secreta		d .		th Avenue, Ellensburg, WA 98		
Name and Title	·	Date	Addross		Phone	

Chemical Dependency Professional Advisory Committee			N/a				
1. Group Name			2. Nam	ne group reported under in 199	9 or Unchanged ⊠		
Department of Health			1998	7	6		
3. Agency to which group r	eports		r was group blished	5. Number of members	6. Number of meetings last biennium		
7. Summary: Primary Resp	onsibilities:						
To advise the Secretary practice as a certified C				ndards of education, experien	ce and examination to		
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation		
1999-2001 Biennium Group	72,336	14,829	87,164	Health Professions			
Program	328,677	67,379	396,056	Account - Fees			
2001-2003 Biennium Group	16,896	3,464	20,360	Health Professions			
Program	285,793	58,588	344,381	Account - Fees			
61. Expected consequence transferred to another ag				a) were assigned to existing/ad	ditional staff, b) were		
a) Advisory responsibil		b) DOH is mos advises rule	st likely agency e-making authors s for professio	ority on agency of	ncrease for out of consultant services.		
10. Legal authorization: S	tate Constitutio	n Article, RCW, WA	AC or EO	11. Legal Authorization i	s:		
RCW 18.205 and WA	C 246-811			☐ Specific ⊠ Gene	ral		
12. Appointing Authority:	Secretary, Dep	artment of Health		13. Is Senate confirmation re	equired? Yes No		
14. Does group have subpo			5. Group memb	er compensation class 🗌 one			
16. Required Representation	n:						
licensed under chapte practitioner; and one n	Four certified chemical dependency professionals; one chemical dependency treatment program director; one physician licensed under chapter 18.71 or 18.57 RCW who is certified in addiction medicine or a licensed certified mental health practitioner; and one member of the public who has received chemical dependency counseling. The Department of Social and Health Services, Division of Alcohol and Substance Abuse or director's designee, serves as an ex officio member.						
17. Federal or other mand	ates:			existing organizations state, lo			
RCW 18.130, RCW 24.44, RCW 43.24 satisfy the mandates listed in number 17:							
19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.							
Shellie Pierce, Program M Name and Title	lanager	6/18/01 Date	PO Box 4786 Addre	9, Olympia WA 98504-7869	(360) 236-4907 Phone		
Hame and Title		Date	Addie		i none		

1. Group Name 2. Name group reported under in 1999 or Unchanged Department of Social & Health Services 3. Agency to which group reports 4. Year was group stabilished 5. Number of Subcommittees Child care/ early childhood services are incresingly critical to the public policy goals of mnay state agencies as well as to the safety and health of children, family well-being, and business productivitiy initiatives. The CCC annually makes recommendations to agencies and the legislature for service improvements. Additionally, they ensure coordination around the states' implementation of federal child care grants. No other agency or committee serves these functions. The committee decided a few years ago on bi-monthly rather than monthly meetings of the full committee as a way to minimize coordination around the states' implementation of federal child care grants. No other agency or committee serves these functions. The committee decided a few years ago on bi-monthly rather than monthly meetings of the full committee as a way to minimize coordination around the impacts. 8. Estimated operating Costs Direct Costs Indirect Costs Indirect Costs Sources of Funds. Fine freat access of Fun	Child Care Coordinati	ng Committe	ee (CCCC)					
3. Agency to which group reports	1. Group Name			2. Nam	e group reported under in 199	9 or Unchanged ⊠		
3. Agency to which group reports								
Program Appropriation 2001-2003 Blennium Group Program \$25,000 \$80,000 \$105,000 \$25,000 \$80,000 \$105,000 \$201-2003 Blennium Group Program \$25,000 \$80,000 \$105,000 \$25,000 \$80,000 \$105,000 \$25,000 \$80,000 \$105,000 \$25,000 \$105,000 \$25,000 \$105,000 \$25,000 \$105,000 \$25,000 \$105,000 \$26,000 \$105,000 \$27,000 \$25,000 \$105,000 \$28,000 \$105,000 \$30,000 \$105,000	Department of Social & Ho	ealth Services		1988	33			
Child care/ early childhood services are incresingly critical to the public policy goals of mnay state agencies as well as to the safety and health of children, family well-being, and business productivity initiatives. The CCC annually makes recommendations to agencies and the legislature for service improvements. Additionally, they ensure coordination around the states's implementation of federal child care grants. No other agency or committee serves these functions. The committee decided a few years ago on bi-monthly rather than monthly meetings of the full committee as a way to minimize coost and time impacts. 8. Estimated Operating Costs Direct Costs Indirect Costs Total Costs Sources of Funds Program Appropriation	3. Agency to which group r	eports				•		
safety and health of children, family well-being, and business productivity initiatives. The CCC annually makes recommendations to agencies and the legislature for service improvements. Additionally, they ensure coordination around the states's implementation of federal child care grants. No other agency or committee serves these functions. The committee decided a few years ago on bi-monthly rather than monthly meetings of the full committee as a way to minimize coost and time impacts. 8. Estimated Operating Costs Direct Costs Indirect Costs Total Costs Sources of Funds Remove e.g., 6.F. Sounce, of Enter Indianance e.g., 6.F. Sounce, of Enter Indianance, e.g., 6.F. So	7. Summary: Primary Resp	onsibilities:						
1999-2001 Biennium Group \$25,000 \$80,000 (staff time) \$105,000	Child care/ early childhood services are incresingly critical to the public policy goals of mnay state agencies as well as to the safety and health of children, family well-being, and business productivity initiatives. The CCC annually makes recommendations to agencies and the legislature for service improvements. Additionally, they ensure coordination around the states's implementation of federal child care grants. No other agency or committee serves these functions. The committee decided a few years ago on bi-monthly rather than monthly meetings of the full committee as a way to minimize							
time) Federal time) Federal time) Federal time) Federal program time) Federal federal time) Federal federal program foup Frogram four Federal four four Federal four four Federal four fou	8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Enter fund sources, e.g., G.F. State/A if	Program Appropriation		
62. Expected consequences if group were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped. a) b) c) 10. Legal authorization: State Constitution Article, RCW, WAC or EO 11. Legal Authorization is: RCW 74.13.085 - 74.13.095 Secretary 13. Is Senate confirmation required? Yes No 14. Does group have subpoena powers? Yes No 15. Group member compensation class one two three four five 16. Required Representation: Per RCW 74.13.085 through 74.13.095 - requires representation from 9 state agencies and 24 stakeholder groups that advise on the expenditures related to chid care. 17. Federal or other mandates: 71. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: 19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.	•	\$25,000						
transferred to another agency (specify), or c) were dropped. a) b) c) 10. Legal authorization: State Constitution Article, RCW, WAC or EO 11. Legal Authorization is: RCW 74.13.085 - 74.13.095 Specific General 12. Appointing Authority: DSHS Secretary 13. Is Senate confirmation required? Yes No 14. Does group have subpoena powers? Yes No 15. Group member compensation class one three four five four five 16. Required Representation: Per RCW 74.13.085 through 74.13.095 - requires representation from 9 state agencies and 24 stakeholder groups that advise on the expenditures related to chid care. 17. Federal or other mandates: 71. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: 19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.	•	\$25,000	\$80,000	\$105,000				
10. Legal authorization: State Constitution Article, RCW, WAC or EO 11. Legal Authorization is: RCW 74.13.085 - 74.13.095 12. Appointing Authority: DSHS Secretary 13. Is Senate confirmation required? ☐ Yes ☒ No 14. Does group have subpoena powers? ☐ Yes ☒ No 15. Group member compensation class ☒ one ☐ two ☐ three ☐ four ☐ five 16. Required Representation: Per RCW 74.13.085 through 74.13.095 - requires representation from 9 state agencies and 24 stakeholder groups that advise on the expenditures related to chid care. 17. Federal or other mandates: 71. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: 19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.) were assigned to existing/ad	ditional staff, b) were		
RCW 74.13.085 - 74.13.095 Specific General	a)		b)		с)			
12. Appointing Authority: DSHS Secretary 13. Is Senate confirmation required? ☐ Yes ☒ No 14. Does group have subpoena powers? ☐ Yes ☒ No 15. Group member compensation class ☒ one ☐ two ☐ three four ☐ five 16. Required Representation: Per RCW 74.13.085 through 74.13.095 - requires representation from 9 state agencies and 24 stakeholder groups that advise on the expenditures related to chid care. 17. Federal or other mandates: 71. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: 19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.	10. Legal authorization: St	ate Constitution	n Article, RCW, WA	C or EO	11. Legal Authorization is	s:		
14. Does group have subpoena powers? ☐ Yes ☒ No 15. Group member compensation class ☒ one ☐ two ☐ three ☐ four ☐ five 16. Required Representation: Per RCW 74.13.085 through 74.13.095 - requires representation from 9 state agencies and 24 stakeholder groups that advise on the expenditures related to chid care. 17. Federal or other mandates: 71. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: 19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.	RCW 74.13.085 - 74.	13.095			⊠ Specific ☐ Gener	ral		
16. Required Representation: Per RCW 74.13.085 through 74.13.095 - requires representation from 9 state agencies and 24 stakeholder groups that advise on the expenditures related to chid care. 17. Federal or other mandates: 71. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: 19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.	12. Appointing Authority: [OSHS Secretar	у		13. Is Senate confirmation re	quired? 🗌 Yes 🗵 No		
Per RCW 74.13.085 through 74.13.095 - requires representation from 9 state agencies and 24 stakeholder groups that advise on the expenditures related to chid care. 17. Federal or other mandates: 17. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: 19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.								
advise on the expenditures related to chid care. 17. Federal or other mandates: 71. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: 19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.	16. Required Representation	n:						
satisfy the mandates listed in number 17: 19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.				esntation from 9	estate agencies and 24 stake	eholder groups that		
knowledge.	17. Federal or other mand	ates:						
Liz Egge, Program Manager DCCEL MS: 45700 Olympia, WA 98504 902-8039		certify via electro	onic submittal that	the above inforn	nation is complete and correct	to the best of my		
	Liz Egge, Program Manag	jer DCCEL	MS: 45700	Olymp	oia, WA 98504	902-8039		

Child Care Facility Fu	nd Advisory	Committee			
1. Group Name			2. Nan	ne group reported under in 19	999 or Unchanged ⊠
Office of Trade and Econo	omic Developme	ent/	1989	5	16
3. Agency to which group r	eports		ar was group ablished	5. Number of members	6. Number of meetings last biennium
7. Summary: Primary Resp	onsibilities:				
This committee reviews	applications for	r loans and grant	ts submitted fo	r funds from the Child Care	Facility Fund.
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation
1999-2001 Biennium Group Program			\$4,000	N	73500
2001-2003 Biennium Group Program			\$4,000	N	73500
63. Expected consequenc transferred to another ag	es if group were ency (specify), o	abolished and re or c) were droppe	sponsibilities: a d.	a) were assigned to existing/a	additional staff, b) were
 Would eliminate privand oversight of apploans and grants suthe Child Care Facil 	olications for bmitted to	b)		c)	
10. Legal authorization: St	tate Constitution	Article, RCW, W	AC or EO	11. Legal Authorization	ı is:
RCW 43.31.504				⊠ Specific ☐ Ger	neral
12. Appointing Authority: [Director, OTED			13. Is Senate confirmation	required? 🗌 Yes 🗵 No
14. Does group have subpo	oena powers? 🗌] Yes ⊠ No 1	5. Group memb	per compensation class 🗌 o	ne
16. Required Representation	n:				
5 members - two from child care expert.	financial institut	tions; one repres	enting philanth	rophic organizations; one c	hild care provider; one
17. Federal or other mand	ates:			existing organizations state, l the mandates listed in numb	
N/A			N/A		
19. Certification: I hereby of knowledge.	certify via electro	nic submittal that	the above infor	mation is complete and correc	ct to the best of my
Gail Gosney, Business Lia	aison	June 28, 20		Box 42525, Olympia, Wa	(360) 725-4034
Name and Title		Date	Addre	ess	Phone

Child Care Partnershi	p Committee				
1. Group Name			2. Nan	ne group reported under in 19	99 or Unchanged ⊠
Office of Trade and Econo Department of Social and			1989	10-15	16
3. Agency to which group r	eports		r was group blished	5. Number of members	6. Number of meetings last biennium
7. Summary: Primary Resp	onsibilities:				
	care affecting but	sinesses and provid	des information	created in statute RCW 74.13.09 to private employers regarding s	
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation
1999-2001 Biennium Group Program			\$2,000	N	73500
2001-2003 Biennium Group Program			\$2,000	N	73500
64. Expected consequence transferred to another ag				a) were assigned to existing/a	dditional staff, b) were
a) Would eliminate input a perspective of private semployers		b) Would limit a	ccess to private	employ This co private	are is an issue for private ers, not just government. mmittee helps involve the sector in developing as to support working is.
10. Legal authorization: St RCW 74.13.0901	tate Constitutior	Article, RCW, WA	C or EO	11. Legal Authorization ⊠ Specific ☐ Gen	
12. Appointing Authority: S	Secretary, DSH	S		13. Is Senate confirmation i	equired? 🗌 Yes 🗵 No
14. Does group have subpo	pena powers?] Yes ⊠ No 15	5. Group memb	per compensation class 🗌 or	e
16. Required Representation	n:				
3 representatives from sn from labor.	nall businesses; 3	3 representatives fro	om medium bus	inesses; 3 representatives from	large businesses and 1 rep
17. Federal or other mand	ates:			existing organizations state, le	
N/A			N/A	the mandates listed in number	51 1 <i>1</i> .
19. Certification: I hereby of knowledge.	certify via electro	nic submittal that t	the above infor	mation is complete and correc	t to the best of my
Gail Gosney, Business Lia	aison	6/28/01 Date	P.O.	Box 42525, Olympia, Wa	(360) 725-4034 Phone

CHILD Profile Govern	ing Board		Joint Executive Management Team of King and Sno Local Health Jurisdictions				
1. Group Name			2. Nan	9 or Unchanged			
None			1992	6	24		
3. Agency to which group r	eports		ar was group ablished	5. Number of members	6. Number of meetings last biennium		
7. Summary: Primary Resp	onsibilities:						
Addresses critical issue	s and develops	s policy for the C	HILD Profile im	munization registry and healt	h promotion system.		
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation		
1999-2001 Biennium Group Program	19,398	none	19,398	In-Kind - costs paid by the agencies participating or staffing			
2001-2003 Biennium Group Program	See question 9.						
65. Expected consequence transferred to another ag				a) were assigned to existing/ad	lditional staff, b) were		
 This Governing Boa process of transferir responsibilities to D 	ng	b)		c)			
10. Legal authorization: S	tate Constitution	n Article, RCW, W	AC or EO	11. Legal Authorization i	is:		
RCWs 43.70.130(10)	, 43.70.080, an	nd 43.70.520		☐ Specific ⊠ Gene	ral		
12. Appointing Authority:				13. Is Senate confirmation re	equired? Yes No		
14. Does group have subpo	pena powers?	☐ Yes ⊠ No	15. Group memb	per compensation class one			
			·	<u> </u>			
Health Seattle and Kin	3 (one each)re ng County, and ing the Washin	the Snohomish I gton Association	Health District), of Local Health	iduciary responsibility for CH one member representing DS n Officials (partner in local imp	SHS (funder via Medicaid		
17. Federal or other mand	ates:			existing organizations state, lo			
None			satisfy	the mandates listed in numbe	r 17:		
19. Certification: I hereby of knowledge.	certify via electro	onic submittal tha	t the above infor	mation is complete and correct	to the best of my		
Janna Halverson, CHILD Name and Title	Profile Manage	er, DOH 6/9/02 Date	7171 Clear Address	nwater Lane, Building 7, Tum	water 236-3554 Phone		

Children & Family Services Oversight Committee				DCFS Oversight Committee			
1. Group Name			2. Nam	2. Name group reported under in 1999 or Unchanged			
DCFS			1985	12	5		
3. Agency to which group r	eports		was group blished	5. Number of members	6. Number of meetings last biennium		
7. Summary: Primary Resp	oonsibilities:						
and suggest solutions; ¡	provide a perm outh and famili	anent mechanism	to recommend	uth and families at the local dichanges; engage in planning dedures are followed; conduction.	ng to address unmet		
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation		
1999-2001 Biennium Group Program	0	under \$75	under \$75	GF 001/010			
2001-2003 Biennium Group Program	0	under \$100	under \$100				
66. Expected consequenc transferred to another ag) were assigned to existing/ad	dditional staff, b) were		
a) None		b) None		c) None			
10. Legal authorization: S	tate Constitutio	n Article, RCW, WAG	C or EO	11. Legal Authorization	is:		
SHB 433				☐ Specific ⊠ Gene	eral		
12. Appointing Authority:	DCFS Regiona	I Administrator		13. Is Senate confirmation re	equired? 🗌 Yes 🔀 No		
14. Does group have subpo	oena powers?	☐ Yes ⊠ No 15	. Group memb	er compensation class 🗌 on	e		
16. Required Representation	on:						
	e a liaison func	tion between the lo	ocal oversight	will be a member of the Chil committee and statewide co			
17. Federal or other mand	17. Federal or other mandates: 75. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:						
			Region	3 Children's Executive Tear	m		
19. Certification: I hereby of knowledge.	certify via electro	onic submittal that tl	he above inform	nation is complete and correct	t to the best of my		
Debbie Gomi, Regional P	rogram Manag	er June 29, 200		s, 840 North Broadway, MS I tt, WA 98201	N31-9 425-339-4793		
Name and Title		Date	Addre		Phone		

Children & Family Se Region 2	rvices Overs	ight Committee) –				
1. Group Name			2.	2. Name group reported under in 1999 or Unchanged			
DSHS - DCFS, Region 2			1986	10	13		
3. Agency to which group reports 4. Year was great established				5. Number of members	6. Number of meetings last biennium		
7. Summary: Primary Res	ponsibilities:						
needs of children and f	amilies in south	neast Washington.	The committee	forum for community inpu ee is expected to identify or regional input into the Ch	duplication and gaps in		
B. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation		
1999-2001 Biennium Group Program	1,700.00		1,700.00	GF-S			
2001-2003 Biennium Group Program	1,700.00		1,700.00	GF-S			
67. Expected consequence transferred to another a				a) were assigned to existing	g/additional staff, b) were		
As a citizen advisor functions could not by staff.			ng legislation re to children and	d family cons feedl	Division would not have a istent source of input and back regarding services to re and families at the local.		
10. Legal authorization: S	tate Constitutio	n Article, RCW, WA	AC or EO	11. Legal Authorizati	on is:		
Chapter 74.14A RCV	V			⊠ Specific □ G	eneral		
12. Appointing Authority:	Alfonso Garcia	, Regional Admini	strator	13. Is Senate confirmation	on required? 🗌 Yes 🔀 No		
14. Does group have subp	_			per compensation class 🛚			
16. Required Representation	on:						
People residing within	the central/so	utheast Washingto	on region (Reg	ion 2).			
17. Federal or other mand	lates:			existing organizations state the mandates listed in num	e, local or private, which could nber 17:		
19. Certification: I hereby knowledge.	certify via electr	onic submittal that	the above infor	mation is complete and cor	rect to the best of my		
Alfonso Garcia, Regional	Administrator	6/28/01	DCFS	S, 315 Holton Ave., #200,	Yakima (509) 454-4200		
Name and Title	·	Doto	م دام A	200	Dhana		

Children, Youth and F Committee	amily Servic	es Advisory				
1. Group Name 2. Name group reported under in 1999 or Unchanged ⊠						
DSHS			1982	16	14	
3. Agency to which group reports 4. Year was group established 5. Number of members				6. Number of meetings last biennium		
7. Summary: Primary Resp	onsibilities:					
Secretary in the develop	oment of a part	nership plan to ut	ilize public and	lished in statute and charg I private resources for child d other child welfare servic	welfare services and to	
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation	
1999-2001 Biennium Group Program	\$8,846		\$8,846	GF S GF F		
2001-2003 Biennium Group Program	\$8,850		\$8,850	GF S GF F		
68. Expected consequence transferred to another ag	es if group were jency (specify),	abolished and resor c) were dropped	sponsibilities: a	a) were assigned to existing/	additional staff, b) were	
transferred to another agency (specify), or c) were dropped. a) The Advisory Committee is the most efficient by structure to bring together representatives of law enforcement, the courts, private agencies, & other interest groups to advise the department on matters pertaining to child welfare services. c) Obtaining input from these various sources would be more difficult and less effective without the Advisory Committee.						
10. Legal authorization: St	tate Constitution	n Article, RCW, WA	AC or EO	11. Legal Authorization	n is:	
RCW 74.13.031 (9)				⊠ Specific ☐ Ge	neral	
12. Appointing Authority: A	Assistant Secre	tary Children's A	dministration	13. Is Senate confirmation	required? 🛛 Yes 🗌 No	
14. Does group have subpo	oena powers? 🛭	Yes 🗌 No	15. Group	member compensation class	s 🛮 one 🗌 two 🔲 three 🔲 four 🔲 five	
16. Required Representation	n:					
At least one member n	nust represent	the adoption com	munity.			
17. Federal or other manda To advise state agend			77. Other e satisfy	existing organizations state, the mandates listed in numb	local or private, which could per 17:	
19. Certification: I hereby of knowledge.	certify via electro	onic submittal that	the above infor	mation is complete and corre	ect to the best of my	
Colleen Winter, Confident	ial Secretary	7/6/01		Box 45710, Olympia, WA 9		
Name and Title		Date	Δddre	99	Phone	

Chiropractic Advisory Committee			Same			
1. Group Name			2. Nam	e group reported u	ınder in 199	9 or Unchanged ⊠
Department of Labor and	Industries		1979	10)	18
3. Agency to which group i		4. Year	r was group blished	5. Number members	of	6. Number of meetings last biennium
	ory Committee (. The work of the chiropractic convelopment, and	nis committee is e mmunity. The do policy issues. Th	essential to fulfictors on this coney regularly p	lling the regulator mmittee function	y mandate (as advisors	
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of F Enter fund sources, e.g., G.I appropriated or N if non app	F. State/A if	Program Appropriation
1999-2001 Biennium Group Program	\$250	\$12,500	\$12,750	609/A	ophatea	N/A
2001-2003 Biennium Group	\$275	\$12,600	\$12,875	609/A		N/A
Program 69. Expected consequence) were assigned to	existing/ad	 ditional staff, b) were
transferred to another agency (specify), or c) were dropped. a) The Chiropractic Advisory Committee (CAC) cannot be abolished because the Department's staff relies upon the advice of these representatives of the clinician community in establishing educational programs. The CAC provides an irreplaceable, objective, clinical resource to the department that is politically acceptable to the Washington State Chiropractic physicians. 10. Legal authorization: State Constitution Article, RCW, WAC or EO This advisory committee or a different agency, since the be dropped, as their education to to be dropped, as their education and the bed propred. This work could not be transferred to a different agency, since the be dropped, as their education to to sa different agency, since the be dropped, as their education and the propriscin of quality care to injured workers. These topics cannot be adequately addressed by any other state agency, since treatment of the injured workers, self insure retrospective rating emplor (and their representatives) department claim staff, and others. The advantages of accessing these advisory services far surpass the logation and to practicing chiropractic physicians.					ned, as their educational, aking, and quality of care desired by practitioners, workers, self insured, and ctive rating employers ir representatives); ent claim staff, and The advantages of ag these advisory far surpass the low rolved in maintaining this collaborative problem information sharing, and esolution.	
14. Does group have subpo	oena powers?] Yes ⊠ No 15	5. Group memb	er compensation c	lass ⊠ one	two 🗌 three 🗌 four
	nsed Chiropract	ic Physicians who				hiropractic Association
17. Federal or other mand N/A19. Certification: <i>I hereby knowledge</i>.		onic submittal that t	satisfy N/A	the mandates liste	d in number	
Joanne McDaniel, Provide Coordinator	er Communicati		Healtl PO Bo Olymp	tment of Labor & n Services Analys ox 44322 oia, WA 98504-43	is	360-902-6817
Name and Title		Date	Addre	ss		Phone

Chiropractic Quality	Assurance C	ommission						
1. Group Name			2. Name group reported under in 1999 or Unchanged ⊠					
Department of Health			1994	14	19			
3. Agency to which group i	reports		r was group blished	5. Number of members	6. Number of meetings last biennium			
7. Summary: Primary Resp	oonsibilities:							
				titioners by: establishing er d competency; and enforcin				
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation			
1999-2001 Biennium Group Program	121,775 991,243	24,355 24,100	146,130 1,015,343	Health Professions Account				
2001-2003 Biennium Group Program	121,775 991,243	24,355 24,100	146,130 1,015,343	Health Professions Account				
70. Expected consequence transferred to another ag) were assigned to existing/a	dditional staff, b) were			
 Would not have approfessional experti 		b) Would not h professiona	nave appropria Il expertise	te c) Public	would not be protected			
10. Legal authorization: S	tate Constitutio	on Article, RCW, WA	AC or EO	11. Legal Authorization	is:			
18.25 RCW				⊠ Specific ☐ Gen	eral			
12. Appointing Authority:	Governor			13. Is Senate confirmation	required? 🛛 Yes 🗌 No			
14. Does group have subpo	oena powers? [⊠ Yes ☐ No 1	5. Group memb	er compensation class 🗌 or	ne 🗌 two 🔲 three 🔲 four 🗵 five			
16. Required Representation	on:							
11 Practicing Chiropra	ctors - 3 Publi	c Members						
17. Federal or other mand	lates:			existing organizations state, letter the mandates listed in number				
None			Sausty	and mandates nstea in numb	o			
19. Certification: I hereby knowledge.	certify via electr	ronic submittal that	the above infori	mation is complete and correc	et to the best of my			
Connie Glasgow, HSC3		June 20, 20	001 MS: 4	7868	(360) 236-4871			
Name and Title		Date	Addre		Phone			

Citizens Advisory Cou and Drug Addiction	uncil (CAC) on	Alcoholism			
1. Group Name			2. Nam	ne group reported under in 19	99 or Unchanged ⊠
DSHS/DASA			1975	7-15	12
3. Agency to which group r	eports		ar was group ablished	5. Number of members	6. Number of meetings last biennium
7. Summary: Primary Resp	onsibilities:				
Oversees development on the development of r				ent and prevention programs ention and 70.96A.	s. Advises the Secretary
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation
1999-2001 Biennium Group Program	\$15,300		\$15,300	GF-S	LA1
2001-2003 Biennium Group Program	\$17,300		\$17,300	GF-S	LA1
T1. Expected consequence transferred to another ag no community involve conflict of interest	ency (specify), or	c) were droppe	esponsibilities: a d. nnical expertise		dditional staff, b) were munity participation, n of law, poor public
10. Legal authorization: S	tate Constitution A	Article, RCW, W	AC or EO	11. Legal Authorization	is:
RCW 70.96A.070				⊠ Specific ☐ Gen	eral
12. Appointing Authority:	Secretary, DSHS			13.Is Senate confirmation re	equired? 🗌 Yes 🗵 No
14. Does group have subpo	oena powers? 🗌 \	∕es ⊠ No	15. Group me	ember compensation class $oxtime$	one 🗌 two 🗌 three 🗌
16. Required Representation	n:				
Two-thirds of the CAC represent minority gro				cupation relating to alcoholis	m and drug addiction,
17. Federal or other mand	ates:			existing organizations state, lethe mandates listed in numb	
N/A			N/A	the mandates nated in numb	or 17.
19. Certification: I hereby of knowledge.	certify via electroni	c submittal that	the above infori	mation is complete and correc	et to the best of my
Keri Patzer, Special Proje	cts Coordinator	6/19/01	РО В	ox 45330, Olympia, WA 985	504 438-8053
Name and Title		Date	Addre		Phone

City and County Design	ty Design Standards Was not reported					
1. Group Name			2. Nan	ne group reported under in 199	9 or Unchanged 🗌	
WSDOT			1994	12	4	
3. Agency to which group r	eports		r was group ablished	5. Number of members	6. Number of meetings last biennium	
7. Summary: Primary Resp	onsibilities:					
Review and update the	City and Count	ty Design Standa	rds.			
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation	
1999-2001 Biennium Group Program	2,000		2,000	MVF State/A		
2001-2003 Biennium Group Program	2,000		2,000	MVF State/A		
 72. Expected consequence transferred to another age a) Required represents cities and counties or removed. 10. Legal authorization: Some RCW 12. Appointing Authority: Amembers and County Rose 14. Does group have subpositions. 	gency (specify), ation of would be tate Constitution Association of Nad Administration	or c) were dropped b) DOT is required by develop standard by the county men	d. uired by FHWA undards. AC or EO s for city nbers	statewid	on to breaking state law, le design needs for cities nties would not be ed. s: ral equired? Yes No	
16. Required Representation Members need to represent to represent the representation of the representation o		d counties. TIB, (CRAB and WS	DOT are support staff for the	committee	
17. Federal or other mandates: none 81. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: none						
19. Certification: I hereby of knowledge.	certify via electro	onic submittal that	the above infor	mation is complete and correct	to the best of my	
Director, Highways and Lo	ocal Programs	August 8, 2 Date	2001 PO B Addre	ox 47390, Olympia, WA 985	04 360-705-7871 Phone	

Clallam Bay Correction	ns Center Co	ommunity Advi	isory			
1. Group Name				2. Name group reported under in 1999 or Unchanged $\ igtimes$		
Department of Corrections	3		1986	9	4	
3. Agency to which group r	eports		r was group Iblished	5. Number of members	6. Number of meetings last biennium	
7. Summary: Primary Resp	onsibilities:					
	ommunication b	by providing infor		tment and the local community. liscussing and reporting on issu		
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation	
1999-2001 Biennium Group Program	-0-	-0-	-0-			
2001-2003 Biennium Group Program	-0-	-0-	-0-			
73. Expected consequence transferred to another ag				: a) were assigned to existing/ad	Iditional staff, b) were	
a) No similar resources			esources av	ailable. c) The facility wo with the comm	ould lose valuable contact nunity	
10. Legal authorization: St	tate Constitution	n Article, RCW, WA	AC or EO	11. Legal Authorization i	s:	
RCW 72.09.050 (Sec	retary's Authori	ty)		☐ Specific ⊠ Gene	ral	
12. Appointing Authority: S	Superintendent	CBCC		13. Is Senate confirmation re	equired? 🗌 Yes 🔀 No	
14. Does group have subpo	ena powers?] Yes ⊠ No 1	5. Group men	nber compensation class⊠ one	☐ two ☐ three ☐ four	
16. Required Representatio	n:					
1 – Cape Flattery Scho Commerce; 5 – At Lar		Senior Citizens C	Center; 1 – M	akah Tribal Council; 1 – CB/CC	Q Chamber of	
17. Federal or other mand	ates:			r existing organizations state, lo		
None.			None			
19. Certification: I hereby of knowledge.	certify via electro	onic submittal that		ormation is complete and correct	to the best of my	
Patria Robinson-Martin, D Relations and Constituent		ment July 6,		Post Office Box 41101, Olympi Washington 98504-1101	a, (360) 753-0896	
Name and Title		Date		Address	Phone	

Clark College-Board o	of Trustees, I	District 14			
1. Group Name 2. Name group reported under in 1999 or Unchange					
State Board for Communit Colleges	ty and Technic	al	1967	5	26
3. Agency to which group r	eports		r was group ablished	5. Number of members	6. Number of meetings last biennium
7. Summary: Primary Resp	onsibilities:				
The Board of Trustees In District 14.	has the legislat	ive responsibility	of formulating	broad public policy for comi	munity college education in
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation
1999-2001 Biennium Group Program	34,000		34,000	A State	
2001-2003 Biennium Group Program	34,000		34,000	A State	
74. Expected consequenc transferred to another ag				a) were assigned to existing/	additional staff, b) were
 Citizen representation governance of public community colleges lost 	С	b) Same as (a	a)	c) Same	as (a)
10. Legal authorization: St	tate Constitutio	n Article, RCW, W	AC or EO	11. Legal Authorization	n is:
RCW 28B.50.100				⊠ Specific ☐ Ger	neral
12. Appointing Authority:	The governor o	f Washington Sta	te.	13. Is Senate confirmation	required? ⊠ Yes ☐ No
14. Does group have subpo	ena powers?	☐ Yes ⊠ No 1	5. Group memb	per compensation class $oxtimes$ o	ne 🗌 two 🗌 three 🗌 four
16. Required Representation	n:				
The governor shall giv	e consideratior	to geographical	exigencies and	d the interests of labor.	
17. Federal or other mand	ates:			existing organizations state, the mandates listed in numb	
None.			None.		Jei 17.
19. Certification: I hereby of knowledge.	certify via electro	onic submittal that	the above infor	mation is complete and corre	ct to the best of my
Tana L. Hasart, President	6/701		1800 E. McLo	oughlin Blvd., Vancouver W	A 98663 360.992.2494
Name and Title	Date		Address	-	Phone

Clemency and Pardor	s Board				
1. Group Name			2. Nam	e group reported under in 199	99 or Unchanged ⊠
Governor			1985	5	
3. Agency to which group r	eports		r was group Iblished	5. Number of members	6. Number of meetings last biennium
7. Summary: Primary Resp	onsibilities:				
	e and pardonii			e Department of Corrections ases; and (2) makes recom	
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation
1999-2001 Biennium Group Program	\$2,355.53	\$14,500	\$16,855.53	G.F. State	
2001-2003 Biennium Group Program	\$2,500	\$15,500	\$18,000	G.F. State	
75. Expected consequenc transferred to another ag	es if group were ency (specify),	' e abolished and res or c) were dropped	sponsibilities: a d.) were assigned to existing/ad	dditional staff, b) were
a)		ISRB. The I	kely agency wo ISRB prior the S , exercised sim	Sentencing recomm	erdisciplinary nature of endations to the or could be lost.
10. Legal authorization: St	tate Constitutio	n Article, RCW, WA	AC or EO	11. Legal Authorization	is:
RCW. 9.94.250				Specific Gene	eral
12. Appointing Authority:	Governor			13. Is Senate confirmation re	equired? 🛛 Yes 🔲 No
14. Does group have subpo	ena powers?	☐ Yes ⊠ No 1	5. Group membe	er compensation class $oxtimes$ on	e 🔲 two 🔲 three four 🔲 five
16. Required Representation	n:				
Non Specified by Statu	ute				
17. Federal or other mand	ates:			xisting organizations state, lo	
N/A			N/A		
19. Certification: I hereby of knowledge.	certify via electro	onic submittal that	the above inforn	nation is complete and correct	t to the best of my
Everett H. Billingslea, Ger	neral Counsel	6/11/2001	Office	of the Governor	753-6780
Name and Title		Date	Addres		Phone

Clover Park Community College-Board of Trustees, District 29			Uncha	Unchanged			
1. Group Name			2. Nan	2. Name group reported under in 1999 or Unchanged ⊠			
State Board for Communi Colleges	ty and Technic	al	1991	5	23		
3. Agency to which group	reports		r was group ablished	5. Number of members	6. Number of meetings last biennium		
7. Summary: Primary Resp	oonsibilities:						
				occuptional education, basiccept gifts and grants, offer			
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation		
1999-2001 Biennium Group	30		30	G.F. State/A			
Program	31,329		31,329	G.F. State/A			
	10,792		10,792	Local Funds			
2001-2003 Biennium Group	34		34	G.F. State/A			
2001-2003 Biennium Group Program	30,707		30,707	G.F. State/A			
	13,179		13,179	Local Funds			
76. Expected consequence transferred to another a				a) were assigned to existing/a	additional staff, b) were		
a) Loss of one layer of and financial review		b) Loss of con support	nmunity interes	st and c)			
10. Legal authorization: S	tate Constitutio	n Article, RCW, WA	AC or EO	11. Legal Authorization	is:		
RCW 28B.50.1405				Specific Gen	eral		
12. Appointing Authority:	Governor			13. Is Senate confirmation required? ⊠ Yes ☐ No			
14. Does group have subp	oena powers?] Yes ⊠ No 1	5. Group memb	per compensation class 🛛 or	ne 🗌 two 🔲 three 🔲 four		
16. Required Representation	on:						
RCW 28B.50.100 - Earepresentative from but			ident of the dis	trict and the board members	ship shall include one		
17. Federal or other mand None	lates:			85. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: None			
19. Certification: I hereby knowledge.	certify via electro	onic submittal that	the above infor	mation is complete and correc	ct to the best of my		
Vallie Jo Fry, Vice Presid	ent of Finance	July 6, 200		Steilacoom Blvd. SW wood, WA 98499	253/589-5537		
Name and Title		Date	Addre	ess	Phone		

Coastal Dungeness C	rab Advisory	/ Group			
1. Group Name			2. Nam	ne group reported under in 199	99 or Unchanged ⊠
Department of Fish and W	/ildlife		1997	19	16
3. Agency to which group re	eports		r was group blished	5. Number of members	6. Number of meetings last biennium
7. Summary: Primary Resp	onsibilities:				
Help construct options f fishery participation/effo				e coast of Washington. Offer n of rules.	rs recommendations for
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation
1999-2001 Biennium Group	0	0	0	appropriated of 1111 Horrappropriated	
Program	0	0	0		
2001-2003 Biennium Group	0	0	0		
Program	0	0	0		
77. Expected consequence transferred to another ag) were assigned to existing/ad	dditional staff, b) were
a) no industry/recreation representation	onal	b) no authority rules	to implement		could achieve results advisory group
10. Legal authorization: St	ate Constitution	n Article, RCW, WA	AC or EO	11. Legal Authorization	is:
				☐ Specific ⊠ Gene	eral
12. Appointing Authority: \	WDFW			13. Is Senate confirmation re	equired? 🗌 Yes 🗵 No
14. Does group have subpo	ena powers?	☐ Yes ⊠ No 1	5. Group memb	er compensation class 🗌 on	e
16. Required Representatio	n:				
None					
17. Federal or other mandates: 86. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:					
19. Certification: I hereby of knowledge.	ertify via electro	onic submittal that	the above infori	mation is complete and correct	t to the best of my
Jill Montgomery, Executive	e Secretary	7/10/01	600 C	Capitol Way; Olympia 98501	-1091 902-2234
Name and Title		Date	Addre	ess	Phone

Collection Agency Bo	ard					
1. Group Name			2. Nan	ne group reported ur	nder in 1999	or Unchanged 🗵
Department of Licensing			1971			1
3. Agency to which group r	eports		r was group blished	5. Number of members	of	6. Number of meetings last biennium
 Summary: Primary Resp Authority to revoke, Advise the Director of licensing statute. 	suspend, deny of DOL in matt	ers relating to the a	administration	of Chapter 19.16. F	RCW.	
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Fui Enter fund sources, e.g., G.F. appropriated or N if non approp	State/A if	Program Appropriation
1999-2001 Biennium Group	\$4,404	\$0	\$4,404	Gen Fund - State	e (001) A	
Program	\$384,656	\$95,494	\$480,150	Gen Fund - State	e (001) A	
2001-2003 Biennium Group Program	\$4,536 \$396,195	\$0 \$98,358	\$4,536 \$494,553	Gen Fund - State Gen Fund - State		
78. Expected consequence transferred to another ag				a) were assigned to e	existing/add	litional staff, b) were
a) Board expertise is of licensing and discip functions of the program to board: * conducts all discip applicant hearings; * ensures that those with criminal historic adversely affect the they become licensed denied licensure. (CONTINUED NEX	linary gram. The linary and e applicants es that public if ed are T COLUMN)	* ensure that addressed in Collection A Final decision may be addressed with knowle requirement the industry (CONTINUE)	* ensure that pubic complaints are addressed if licensees violate the Collection Agency Act. Final decisions on disciplinary cases may be administered better by those * The industry suppoonly with the under a board would be in board also provides advise regarding chousiness practices the collection indus			practices occuring in action industry. There is agency that possesses asary expertise to collection agency
10. Legal authorization: S	tate Constitutio	on Article, RCW, WA	AC or EO	11. Legal Auth		
RCW 19.16.280				⊠ Specific	c 🗌 Genera	al
12. Appointing Authority:	Governor			13. Is Senate conf	irmation red	quired? 🗌 Yes 🔀 No
14. Does group have subpo	oena powers? [⊠ Yes 🗌 No 1	5. Group memb	er compensation cla	ass 🗌 one	☐ two ☑ three ☐ four
16. Required Representation Five members consists or a combination of boo immediately prior to appropriate to	ing of: two pul	on agency busines	ss in Washingt	on State for a perio		or executive employee s than five years
17. Federal or other mand None			satisfy None	the mandates listed	in number	
19. Certification: I hereby c knowledge.	certify via electi	onic submittal that	the above infor	mation is complete a	nd correct t	o the best of my
Harumi Tucker Tolbert	6/8/01	405 Blac	ck Lake Boule	vard SW, Olympia,	WA 98502	(360) 664-1389

Trustees, District 19	munity Colle	ge-Board of			
1. Group Name			2. Nan	ne group reported under in 19	999 or Unchanged ⊠
State Board for Communic Colleges	ty and Technic	al	1967	5	24
			ar was group ablished	5. Number of members	6. Number of meetings last biennium
7. Summary: Primary Resp	oonsibilities:				
	ite such rules a			vernance of the community ther acts not inconsistent w	
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation
1999-2001 Biennium Group Program	28,695.00		28,695.00	State GF	081/101
2001-2003 Biennium Group Program	57,666.00		57,666.00	State GF	081/101
79. Expected consequence transferred to another ag				a) were assigned to existing/a	additional staff, b) were
a) Loose governance a			d or HECB. Lo	operat	ntability of ions/public money couldn't iranteed
10. Legal authorization: S	tate Constitutio	n Article, RCW, W	AC or EO	11. Legal Authorization	ı is:
RCW 28B.50.010				Specific Ger	neral
12. Appointing Authority:	Governor			13. Is Senate confirmation	required? 🛛 Yes 🗌 No
14. Does group have subpo	pena powers?	ີ Yes ⊠ No 1	5. Group memb	er compensation class 🗌 o	ne
16. Required Representation	on:				
Geographical - resider	nt of Benton or	Franklin County,	CBC's service	area.	
17. Federal or other mandates: 88. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:					
19. Certification: I hereby of knowledge.	certify via electro	onic submittal that	the above infor	mation is complete and corre	ct to the best of my
Louise Meyers		6/15/01	2600 9930	North 20th Avenue, Pasco,	WA 509/547-0511, ext 2202
Name and Title		Date	Addre		Phone

Columbia River Gorge Commission				Same			
1. Group Name			2. Nam	2. Name group reported under in 1999 or Unchanged ⊠			
Same			1987	13	12		
3. Agency to which group r	eports		r was group blished	5. Number of members	6. Number of meetings last biennium		
7. Summary: Primary Resp	onsibilities:						
Bi-state agency created Scenic Area.	by the Colum	bia River Gorge Na	ational Scenic	Area Act to administer the	300,000 acre National		
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation		
1999-2001 Biennium Group	72,442	0	72,442	State General Funds	72,442		
Program	1,259,924	0	1,259,924	(OR and WA)	1,259,924		
				State General Funds			
2001-2003 Biennium Group	71,660	0	71,660	State General Funds	71,660		
Program	1,363,432	0	1,363,432	State General Funds	1,363,432		
80. Expected consequenc transferred to another ag	es if group wer Jency (specify),	e abolished and res or c) were dropped	' sponsibilities: a I.) were assigned to existing/	additional staff, b) were		
The "group" is the a There would be no additional staff.		transferred the Columbi	esponsibilities to another age ia River Gorge and federal law	ncy under droppe Compact River	esponsibilities cannot be ed under the Columbia Gorge Compact 43.97.015 deral law (below).		
10. Legal authorization: S	tate Constitutio	n Article, RCW, WA	C or EO	11. Legal Authorizatio	n is:		
RCW 43.97				☐ Specific ⊠ Ge	neral		
12. Appointing Authority: (Forest Service (1)	Governors (6),	Counties (6), Unite	ed States	13. Is Senate confirmation	required? ⊠ Yes ☐ No		
14. Does group have subpo	ena powers?	☑ Yes ☐ No 15	5. Group memb	er compensation class 🗌 o	one 🗌 two 🔲 three 🔲 four		
16. Required Representation	n:						
All Columbia River Go	rge Commissio	on has 13 Commis	sioner and 9 s	taff, all exempt positions.			
17. Federal or other mand	ates:				local or private, which could		
Columbia River Gorg 99-663, 16 U.S.C. 54		nic Area Act, P.L.	None	the mandates listed in numl	per 17:		
00 000, 10 0.0.0.0	1 ot ooq.						
19. Certification: I hereby of knowledge.	certify via electr	onic submittal that t	the above inforn	nation is complete and corre	ect to the best of my		
Robert McIntyre, Administrative Assistant		June 11, 20		ox 730, White Salmon, ington, 98672	509-493-3323		
Name and Title		Date	Addre	-	Phone		

Community & Technical Colleges, State Board For Unchanged							
1. Group Name			2. Na	ame group reported und	der in 1999 or Unchanged 🛚		
Same			1967	9	18		
3. Agency to which group r	eports		was group blished	5. Number of members	6. Number of meetings last biennium	í	
 7. Summary: Primary Responsibilities: Established in RCW 28B.50.090. Primary responsibilities: develops the operating and capital budgets for the 30 community and technical college districts which are forwarded to the Governor and the Legislature, once the Legislature and the Governor take action, makes decisions on how to allocate the operating and capital budgets for 							
- establishes minimum sta					wo-year college system,		
- audits the fiscal and enr	ollment adminis	stration of the colle					
 provides policy direction serves as the fiscal auth establishes policy for the 	ority for all real	property owned b		college system, and			
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State// appropriated or N if non appropriated			
1999-2001 Biennium Group Program	\$ 58,867 \$9,411,175	- 0 - - 0 -	\$ 58,867 \$9,411,175	G.F. State/A G.F.State/A =\$8,444 G.F.Federal/A=\$966	4,361		
2001-2003 Biennium Group Program	\$ 63,500 10,243,600	- 0 - - 0 -	\$ 63,500 10,243,600	G.F.State/A S.F.State/A=\$9,032, S.F.Fed/A=\$1,211,3			
81. Expected consequences if group were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.							
a) It would be difficult to transfer the functions currently handled by the SBCTC to another agency to handle by their existing staff or by simply adding a few staff to another agency. The SBCTC is accountable to the Governor (who appoints the Board members) and to the Legislature as well as to the business community, labor, local communities, students, parents, faculty, etc. The SBCTC provides a coordinating, collaborating, and prioritizing role that is valued by its stakeholders. And the SBCTC serves as the focal point for system decision-making that would have to be replicated elsewhere if this agency was dissolved. b) If the functions currently provided by the SBCTC were transferred to another agency, the receiving agency, the receiving agency would need to be staffed accordingly. That agency would need to develop a learning curve about the policy and operating issues of the colleges. c) The SBCTC provides oversight for the 30 two-year college districts. If the Board was eliminated, this function would need to develop a learning curve about the policy and operating issues of the colleges.						1	
10. Legal authorization: S RCW 28.B.50.090	tate Constitution	n Article, RCW, WA	C or EO	11. Legal Authoriz ⊠ Specific □	General		
12. Appointing Authority: 14. Does group have subpo	ona nowersa F	Voc M No. 45	Group mamb		ation required? Yes No	_	
16. Required Representation			o. Group membe	er compensation class	one two three four		
RCW 28B.50.090 - TI	ne State Board east of the Cas	cade Mountains),			f geography (at least two st one member shall be from		
17. Federal or other mand None			satisfy None	the mandates listed in r		ŀ	
19. Certification: I hereby of knowledge.	certify via electro			-		7	
Sandra J. Wall Director of Administrative	Services	July 6, 2001		eventh Avenue pia, WA 98504	360/586-2157	ſ	
Name and Title (This	person assume	Date s responsibility for	Addre		Phone (formation)	е	

Community Economic	c Revitalizat	ion Board							
1. Group Name			2. Name group reported under in 1999 or Unchanged $\ oxinverigsquare$						
OTED			1982	19	12				
3. Agency to which group r	reports		r group was ablished	5. Number of members	6. Number of meetings last biennium				
7. Summary: Primary Resp	oonsibilities:								
				ses in economically distress ure required by a manufact					
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation				
1999-2001 Biennium Group Program	409,615	195700	515,000	Public Facility Construction	230				
2001-2003 Biennium Group Program	412,690	130,366	543,056	Public Facility Construction	230				
82. Expected consequence transferred to another ag	es if group wer gency (specify),	e abolished and re or c) were droppe	sponsibilities: a d.	a) were assigned to existing/	additional staff, b) were				
a) Valued statewide representative/perspon investment of limfunds			ate agency foo levelopment	develo progra	would lose only economic spment infrastructure im to promote growth in economically distressed				
10. Legal authorization: S	tate Constitutio	n Article, RCW, W	AC or EO	11. Legal Authorization	n is:				
RCW 43.160				⊠ Specific ☐ Ge	neral				
12. Appointing Authority:	Governor			13. Is Senate confirmation	required? 🗌 Yes 🔀 No				
14. Does group have subpo	oena powers? [☐ Yes ⊠ No 1	5. Group memb	per compensation class \Box o	ne				
16. Required Representation Designated by statute selected state agencies	, geographical	large and small bu	usiness, occup	ational, political subdivision	ı, public, legislative,				
17. Federal or other mand	lates:				local or private, which could				
No			NO NO	the mandates listed in number	Del 17:				
19. Certification: I hereby	certify via electr	onic submittal that	the above infor	mation is complete and corre	ct to the best of my				
knowledge. Kate Rothschild, Program	Manager	6/25/01	PO B	ox 42525, Olympia, WA 98	3504 360-725-4058				
Name and Title	<u> </u>	Date	Addre		Phone				

Community HIV Preven	ention Planni	ing Group				
1. Group Name			2. Nam	e group reported under in 199	9 or Unchanged ⊠	
Department of Health			1994	30	13 Meetings; 22 Conf. Calls	
3. Agency to which group i	eports		was group blished	5. Number of members	6. Number of meetings last biennium	
7. Summary: Primary Resp	oonsibilities:					
priority populations and	the unmet nee	eds of those popula	ations and to de	Prevention Plan for Washing etermine if the application for e identified unmet needs.		
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation	
1999-2001 Biennium Group	\$50,000	\$30,000	\$80,000	Federal		
Program	\$6,360,000	\$340,000	\$6,700,000	Federal		
2001-2003 Biennium Group	\$50,000	\$30,000	\$80,000	Federal		
Program	\$6,650,000	\$350,000	\$7,000,000	Federal		
 83. Expected consequences if group were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped. a) The community planning group is is required as a condition of receipt of federal HIV prevention funds. c) The community planning group is required as a condition of receipt of federal HIV prevention funds. 						
10. Legal authorization: S	tate Constitutio	n Article, RCW, WA	C or FO	11. Legal Authorization is	s·	
Required as a condit				Specific Gener		
12. Appointing Authority: Health	Director, Infecti	ous Disease & Re	productive	13. Is Senate confirmation re	equired? 🗌 Yes 🔀 No	
14. Does group have subpo	oena powers?	☐ Yes ⊠ No 15	i. Group membe	er compensation class 🗌 one	two 🗌 three 🔲 four	
16. Required Representation	on:					
				ers must reflect characteristic perts and service providers.	cs of the current and	
17. Federal or other mand	ates:			xisting organizations state, loc		
Required as a condit	Required as a condition of federal funding. Satisfy the mandates listed in number 17: None					
19. Certification: I hereby knowledge.	certify via electr	onic submittal that t	he above inforn	nation is complete and correct	to the best of my	
John F. Peppert, Manage	r HIV Prevention	on 06-15-01	PO Bo	ox 47840, Olympia, WA	360-236-3427	
Name and Title		Data	۸۵۵۲۵		Phone	

Community Outdoor	Athletic Field	ls Advisory Cou	uncil			
1. Group Name			2.	Name group reported under in	1999 or Unchanged ⊠	
Interagency Committee for Recreation (IAC)	or Outdoor		1998	9	6	
3. Agency to which group i	reports		was group blished	5. Number of members	6. Number of meetings last biennium	
7. Summary: Primary Resp	oonsibilities:					
Recreation on the awar	d of funds from non-profit orgar	the Youth Athletic	c Facility grant ring, developir	tions to the Interagency Comr account created in RCW 43.9 ng, equipping, maintaining, and door athletic fields.	99N.060(4), to cities,	
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation	
1999-2001 Biennium Group Program	1,579 49,000		1,579 49,000	Private Contribution - N		
2001-2003 Biennium Group Program	1,000 73,000		1,000 73,000	Private Contribution - N		
84. Expected consequence transferred to another ag				a) were assigned to existing/add	ditional staff, b) were	
a)		b)		c)		
10. Legal authorization: S	tate Constitutio	n Article, RCW, WA	C or EO	11. Legal Authorization is	s:	
RCW 79A.25.800				⊠ Specific ☐ Gener	ral	
12. Appointing Authority:	Legislature & G	Sovernor		13. Is Senate confirmation re	quired? 🗌 Yes 🗵 No	
14. Does group have subpo	oena powers? [ີ Yes ⊠ No 15	5. Group memb	er compensation class 🏻 one	☐ two ☐ three ☐ four ☐ five	
16. Required Representation: The advisory council shall consist of 9 members from the public at large, appointed as follows: a) 4 members appointed by the chairperson of the IAC; b) 2 members appointed by the house of representatives and the minority leader of house of representatives; c) 2 members appointed by the senate 1 each appointed by the majority leader of the Senate and the minority leader of the Senate; and d) 1 member appointed by the Governor, who shall serve as chairperson of the advisory council. The appointments must reflect an effort to achieve a balance among the appointed members based upon factors of geographic, racial, ethnic, and genderdiversity, and with a sense of awareness of community outdoor athletic fields needs.						
17. Federal or other mand None	lates:			existing organizations state, loc the mandates listed in number		
19. Certification: I hereby knowledge.	certify via electro	onic submittal that t	the above infor	mation is complete and correct	to the best of my	
Tammy Owings	7/10/01	P	O Box 40917,	Olympia, WA 98504-0917	902-2637	
Name and Title	Doto	Α.	ddrooc		Dhana	

Commute Trip Reduction Task Force Did not report							
1. Group Name			2. Name group reported under in 1999 or Unchanged ⊠				
Washington State Legisla	ture		1991	28	11		
3. Agency to which group r	eports		r was group iblished	5. Number of members	6. Number of meetings last biennium		
7. Summary: Primary Resp	onsibilities:						
				luate program effectiveness inated. The Task Force pre			
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation		
1999-2001 Biennium Group	9600		9,600	MMF - State/A			
Program	1,632,400	145,000	1,777,400				
2001-2003 Biennium Group	12,000		12,000	MMF - State/A			
Program	1,630,000	145,000	1,775,000				
a) Decrease the effection the program by sign reducing non-govern various government perspectives 10. Legal authorization: Series RCW 70.94.537	vency (specify), veness of ificantly nmental and al	b) The Common program is a transportation integrate C vital and is a from outside	d. ute Trip Reduction closely association on issues. The TR with transport very difficult to e of the agency	ated with be a "ne ability to approace ortation is tied to be manage education."	to A. CTR continues to ew" program and ch. Its success is closely broad input and on. The Task Force is as success. is:		
14. Does group have subpo	oena powers? [☐ Yes ⊠ No 19	5. Group memb	er compensation class $oxtimes$ on	e		
16. Required Representation	n:						
	city representa			velve employer representative following departments: Tra			
17. Federal or other mand	ates:			existing organizations state, lo			
n/a			n/a	the mandates listed in numbe	71 II.		
19. Certification: I hereby of knowledge.	certify via electro	onic submittal that	the above infori	mation is complete and correc	t to the best of my		
Cathy Silins, Manager PT	& TDM Offices	s August 16,	2001 WSD	OT, M.S. 7387, Olympia	360-705-7919		
Name and Title		Date	Addre		Phone		

Connell Citizen Advis	ory Committ	ee					
1. Group Name			2. Naı	me group reported under in 1999	or Unchanged 🛚		
Department of Corrections	3		1991	11	24		
3. Agency to which group r	eports		was group blished	5. Number of members	6. Number of meetings last biennium		
7. Summary: Primary Resp	onsibilities:						
committee must be resigned are advised of changes	dents of the Co and program o	nnell area. The clevelopment, prog	ommittee add rams offered	ne facility and the community. It dresses only Department of Corfor offenders, kept informed of lid not be transferred to another	rections' matters; they escapes and any other		
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation		
1999-2001 Biennium Group Program	-0-	-0-	-0-				
2001-2003 Biennium Group Program	-0-	-0-	-0-				
86. Expected consequenc transferred to another ag				a) were assigned to existing/add	litional staff, b) were		
a) No similar resources	s available	b) No similar re	esources ava	ilable. c) Facility would los coordination with			
10. Legal authorization: Se	tate Constitution	n Article, RCW, WA	C or EO	11. Legal Authorization is:	:		
RCW 72.09.050 (Sec	retary's Author	ity)		☐ Specific ☐ Genera	al		
12. Appointing Authority: S	Secretary, Depa	artment of Correct	ions	13. Is Senate confirmation req	uired? ☐ Yes ⊠ No		
14. Does group have subpo				ber compensation class 🛚 one			
16. Required Representation	n:						
Members of the comm	ittee must be re	esidents of the Co	nnell area.				
17. Federal or other mand	ates:			existing organizations state, locally the mandates listed in number			
None.	None.						
19. Certification: I hereby of knowledge.	certify via electro	onic submittal that t	the above info	rmation is complete and correct to	o the best of my		
Patria Robinson-Martin, D Relations and Constituent	•	iment July		Post Office Box 41101, Olympia Washington 98504-1101	a, (360) 753-0896		
Name and Title		Date		Address	Phone		

Convention and Trade Center, Washington State							
1. Group Name			2. Name group reported under in 1999 or Unchanged				
Same 3. Agency to which group re	on out o		1982	9 5. Number of	6 Number of meetings		
3. Agency to which group r	eports		was group blished	members	6. Number of meetings last biennium		
7. Summary: Primary Resp	onsibilities:						
acquire land in the City It serves to (1) promote, economy and revenue by and international common	of Seattle and to produce and for y creating jobserce and trade; Construction is	o design, construction obtained op- content increased op- and attracting content of and (4) promote the second of the second of the second obtained on the second of the s	ct, maitain and oportunities for nvention and tr he developmer	the objectives of Chapter 3 operate a state convention residents of the state; (2) stade exhibitions and visitors at of the State of Washingtonsion of the facility with a new contract of the state of	and trade center facility. timulate the state's (3) promote domestic n, County of King, City of		
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation		
1999-2001 Biennium Group Program	30.9M		30.9M	G.F. State/ A			
2001-2003 Biennium Group Program	37.8M		37.8M	G.F. State/A			
87. Expected consequence transferred to another ag				were assigned to existing/ad	dditional staff, b) were		
The State would loo that has been create years it would also le needed policy direct come from represen community and the impacted by the Cer	ed over several cose the much ion that can on tatives of the industry that is	specific to opera ly would lo	r Agency would expertise that ate such a facil pose the citizer al to the succes	is required return o ity and it as loose in input that revenue	e would loose substantial n its investment as well e a very successful e and promotional entity.		
10. Legal authorization: St	tate Constitution	n Article, RCW, WA	C or EO	11. Legal Authorization	is:		
RCW 67.40				⊠ Specific ☐ Gene	eral		
12. Appointing Authority: (Governor			13. Is Senate confirmation re	equired? Yes No		
14. Does group have subpo] Yes ⊠ No 15	i. Group membe	er compensation class 🗌 on			
16. Required Representation None	n:						
17. Federal or other manda None	ates:			xisting organizations state, lo the mandates listed in numbe			
19. Certification: I hereby of knowledge.	certify via electro	onic submittal that t	he above inform	nation is complete and correct	to the best of my		
John Christison, Presiden	t 8-:	20-01		ention Place, Seattle, WA 9			
Name and Title	Da	ite	Address		Phone		

Correctional Industrie	s' Board of I	Directors					
1. Group Name			2. Name group reported under in 1999 or Unchanged ⊠				
Department of Corrections	5		1981	13	5		
3. Agency to which group r	eports		was group blished	5. Number of members	6. Number of meetings last biennium		
7. Summary: Primary Resp	onsibilities:						
offenders employment, corrections through pro- and efficient manner; pr enterprise firms; develo establish trade advisory Secretary of the Depart	work experience duction of good covide for select p and design Correct ment of Correct	ce, training in voca ls and services for tion of, contracting correctional Industra- thip committees to tions appoints mer	tions; provide it sale and use; for, and superies work progradvise them of these	onal Industries programs that industries which will reduce operate correctional work provision of work programs with rams. The Board has the author Correctional Industries work committees. The functions ince that would address the results.	the tax burden of rograms in an effective h participating private thority to identify and ork programs; the of the Board are unique		
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation		
1999-2001 Biennium Group	\$36,598		\$36,598	001-General Fund-state			
Program	\$83,366*		\$83,336*				
2001-2003 Biennium Group Program	\$40,000		\$40,000	001-General Fund-state			
88. Expected consequenc transferred to another ag) were assigned to existing/ac	lditional staff, b) were		
a) Offender work progr be operated without of input or individual Board who collective needed service.	ram would the benefit Is on the	b) If the respor	nsibilities were gency, benefits d would be paid	s provided benefit of by that respect	artment would lose the of the Board's input with to policy development lementation.		
10. Legal authorization: St	tate Constitutio	n Article, RCW, WA	C or EO	11. Legal Authorization	s:		
RCW 72.09.070; RCV	N 72.09.080			⊠ Specific ☐ Gene	ral		
12. Appointing Authority: (Governor and L	_egislature		13. Is Senate confirmation re	equired? 🗌 Yes 🗵 No		
14. Does group have subpo	ena powers?] Yes ⊠ No 15	5. Group membe	er compensation class 🗌 on	e 🗌 two 🔀 three 🔲 four		
representing cross-sec	appointed by the ctions of industr	ries and all sizes o	of employers, a	esentatives from labor, three nd three members from the ition/no longer funded).			
17. Federal or other mand None.	ates:			xisting organizations state, lo the mandates listed in numbe			
19. Certification: I hereby of knowledge.	certify via electro	onic submittal that t	he above inforn	nation is complete and correct	to the best of my		
Patria Robinson-Martin, D Relations and Constituent		nment July 6		Post Office Box 41101, Olyn Washington 98504-1101	npia, (360) 753-0896		
Name and Title		Date		Address	Phone		

Correctional Training	Standards a	nd Education						
1. Group Name			2. Name group reported under in 1999 or Unchanged ⊠					
Washington State Crimina Commission	al Justice Traini	ng	1997	14	14			
3. Agency to which group r	eports		r was group ablished	5. Number of members	6. Number of meetings last biennium			
7. Summary: Primary Resp	onsibilities:							
Review and recommend personnel.	d to the Commi	ssion programs a	ınd standards f	or the training and education	n of correctional			
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation			
1999-2001 Biennium Group Program	2,500 0	0	2,500 0	PSEA - State/A				
2001-2003 Biennium Group Program	2,500 0	0	2,500 0	PSEA -State/A				
89. Expected consequenc transferred to another ag				a) were assigned to existing/a	dditional staff, b) were			
 The duties could be assigned to staff; however, this group repesents the customers served by the Commission and is necessary to reach our mission. There is no other agency which could perform this function Valuable input, feedback, support and advise would be eliminated as resources for the Commission. 								
10. Legal authorization: Se RCW 43.101.310	tate Constitution	n Article, RCW, WA	AC or EO	11. Legal Authorization ⊠ Specific ⊡ Gen				
12. Appointing Authority: authority	The Commissio	on is the final appo	ointing	13. Is Senate confirmation	required? 🗌 Yes 🔀 No			
14. Does group have subpo	oena powers? [] Yes ⊠ No 1	5. Group memb	per compensation class 🛛 or	ne 🗌 two 🔲 three 🔲 four 🔲 five			
16. Required Representation: Three must be employed in the state correctional system, three must be employed in county correctional systems, two must be employed in juvenile corrections or probation, one at the local level and the other at the state level; two must be employed in community ocorrections; one must represent community colleges; one must represent four-year colleges and universities; and two must be additional persons with experience and interest in correctional training standards and education. At least one of the members appointed under this section must be currently employed as front line correctional officer in the county and one in the state.								
17. Federal or other mandates: None 98. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: None								
19. Certification: I hereby of knowledge.	certify via electro	onic submittal that	the above infor	mation is complete and correc	t to the best of my			
Michael D. Parsons, Exec	utive Director	June 29, 2 Date	001 1901 Addre	0 1 st Ave. S, Seattle, WA. 98	206-835-7347 Phone			

Cosmetology, Barbering, Esthetics, and Manicuring Advisory Board			Cosme	etology Advisory Board				
1. Group Name			2. Nan	2. Name group reported under in 1999 or Unchanged ⊠				
Department of Licensing			1998	9	24			
3. Agency to which group r	eports		ar was group ablished	5. Number of members	6. Number of meetings last biennium			
7. Summary: Primary Resp	oonsibilities:							
The Board is very involve	ved in providing	g technical advice	regarding cha	nging business practices i	n the industry.			
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation			
1999-2001 Biennium Group Program	220,000	0	220,000	General Fund	220,000			
2001-2003 Biennium Group Program	220,000	0	220,000	General Fund	220,000			
90. Expected consequenc transferred to another ag				a) were assigned to existing	g/additional staff, b) were			
a)	b) c)							
10. Legal authorization: S	tate Constitutio	on Article, RCW, W	AC or EO	11. Legal Authorization	on is:			
RCW 18.16	NAC 308-20			Specific G	eneral			
12. Appointing Authority:	Director			13. Is Senate confirmation	n required? 🗌 Yes 🗵 No			
14. Does group have subpo	oena powers? [☐ Yes ⊠ No 1	5. Group memb	per compensation class	one ☐ two ☒ three ☐ four			
16. Required Representation	n:							
cosmetology training;	a consumer whare currently p	no is unaffliated wo bracting licensees	ith the cosmet	a public vocational techni blogy, barbering, esthetics n engaged in the practice	, or manicuring industry;			
17. Federal or other mand	17. Federal or other mandates: 99. Other existing organizations state, local or private, which could							
N/A			-	satisfy the mandates listed in number 17:				
			NONE					
19. Certification: I hereby of knowledge.	certify via electr	onic submittal that	the above infor	mation is complete and corr	ect to the best of my			
Mary Jelvik, Administrator		05/30/2001		Post Office Box 9026 (360) 586 Olympia, Washington 98507-9026				
Name and Title Date Address					Phone			

County Interagency C	oordinating	Councils (CICC	;)			
1. Group Name			2. Na	ame group reported	under in 19	999 or Unchanged ⊠
Department of Social and Health Services (DSHS)		es 1988 a	nd per RCW in 1992	Minimum of applicabl	_	Minimum of 4
3. Agency to which group re	eports		was group olished	5. Number of members		6. Number of meetings last biennium
7. Summary: Primary Resp	onsibilities:					
CICC's in each county or g and toddlers with disabilitie advise and assist county ea assist the contracor in carr	es and their famili arly intervention	ies as defined in the services contractors	Individuals with D	Disabilities Education Apropriet	Act (IDEA), ntion servic	Part C. The CICC shall e system, advise and
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Fund Enter fund sources, e.g., G.F. Sta appropriated or N if non approprie	nte/A if	Program Appropriation
1999-2001 Biennium Group Program	\$ 420,000 \$ 13.4M	0	\$ 420,000 \$ 13.9M	Federal IDEA, Par Federal IDEA, Par	t C	 \$ 13,932,234
2001-2003 Biennium Group Program	\$ 420,000 \$ 13.4M	0	\$ 420,000 \$ 13.9M	Federal IDEA, Par Federal IDEA, Par		\$ 13,932,234
91. Expected consequence transferred to another ag				were assigned to ex	isting/addi	tional staff, b) were
 a) Decreased family input and coordination within local early intervention services ystems could compromise ability to comply with IDEA, Part C. 10. Legal authorization: State Constitution Article, RCW, WAC or EO 11. Legal Authorization is: C) An uncoordinated local system of early intervention services would reently intervention services would reently input to service system. 10. Legal authorization: State Constitution Article, RCW, WAC or EO 11. Legal Authorization is: Title 70 RCW: Public Health and Safety, Section 70.195.020 						ention services would re- ulting in confusion for d failure to comply with C and loss of federal
12. Appointing Authority: I14. Does group have subpo				r compensation clas		uired? Yes No
2000 g. oup						four five
16. Required Representatio	n:					
a). Two or more parents of a child (from birth through 12 years of age) with a disability/developmental delay, who is not a staff member of an early intervention service agency or parent or advocacy organization. One member from the following: b). public and/or private early intervention providers; c.) higher education/training personnel; d.) local health department/district; e.) county human services department; f). school districts or the educational service district; g.) DSHS, Children's Administration, DDD, CSO; h.) Tribal Government; i.) county mental health or Regional Support Network; j.) Washington State Migrant Council where applicable; k.) medical provider; l.) service providers of minority communities; m.) child care providers; n.) Military services; o.) other programs serving children birth to three and their families.						
17. Federal or other manda	17. Federal or other mandates: 100. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:					
None			None	io mandates noted n	T Hamber	
19. Certification: I hereby of knowledge.	certify via electro	onic submittal that t	he above inform	ation is complete and	d correct to	the best of my
Sandy Loerch, Program D	irector	June 17, 200		ox 45201 a, WA 98504-5201		360/902-8496
Name and Title		Date	Addres	•		Phone

County Road Administration Board			Unchar	Unchanged			
1. Group Name			2. Nam	e group reported under in 199	9 or Unchanged ☐		
County Road Administrati	on Board		1965	9	8		
3. Agency to which group r	eports		r was group ablished	5. Number of members	6. Number of meetings last biennium		
7. Summary: Primary Resp	oonsibilities:						
for county road reconst	ruction; administration; ruction; administration; ruction; administration; ruction; administration; administra	ster the County A ortion of the Motor	rterial Preserva Vehicle Fuel T	dministration; administer the tion Program for paved coun ax; develop and implement of ty road departments.	ity road preservation;		
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation		
1999-2001 Biennium Group	25,300	28,200	53,500	108 MVF			
Program	91,042,300	51,200	91,093,500	102 RAP, 186 CAP			
2001-2003 Biennium Group	26,565	29,610	56,175	108 MVF			
Program	80,518,325	45,500	80,563,825	102 RAP, 186 CAP			
92. Expected consequence transferred to another ag) were assigned to existing/ad	Iditional staff, b) were		
a) Loss of accountability, credibility b) and effectiveness c) County road department supervision, fuel tax allocation, grants program administration and computer support would disappear.							
10. Legal authorization: S	tate Constitutio	n Article, RCW, W	AC or EO	11. Legal Authorization i	s:		
RCW 36.78				Specific ☐ Gene	ral		
12. Appointing Authority:	Washington Sta	ate Association of	Counties	13. Is Senate confirmation re	equired? 🗌 Yes 🔀 No		
14. Does group have subpo	pena powers?	☐ Yes ⊠ No 1	5. Group membe	er compensation class 🗌 one	e		
16. Required Representation	on:						
				ers from counties 125,000 o two members from counties			
17. Federal or other mandates: 101. Other existing organizations state, local or private, which could							
satisfy the mandates listed in number 17:							
19. Certification: I hereby knowledge.	certify via electro	onic submittal that	the above inforn	nation is complete and correct	to the best of my		
Jay P. Weber		8/6/2001		Chandler Court SW, Ste 240			
Name and Title		Date	Addre	SS	Phone		

Court Education, Boa	rd for		Unchanged				
1. Group Name			2. Name group reported under in 1999 or Unchanged				
Administrator for the Courts			1980	16	8		
3. Agency to which group r	eports		r was group blished	5. Number of members	6. Number of meetings last biennium		
7. Summary: Primary Resp	onsibilities:						
court support personne education. Coordinate	I in the state. E judiciary educa eds assessmen	stablish standard tion programs and ts and develop a	s, long range of d services with long range jud	goals, and comprehen in the state as well as	and services for all judicial and sive plans for judiciary with regional and national lum plan. Provide judicial		
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State appropriated or N if non appropriate			
1999-2001 Biennium Group Program	\$707,750		\$707,750	PSEA/A			
2001-2003 Biennium Group Program	\$694,550		\$694,550	PSEA/A			
 93. Expected consequences if group were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped. a) Reduced judiciary involvement in setting education goals and developing programming. b) OAC education staff would be less effective without the interaction of the judiciary. c) The efficiency of judicial administration and the quality of the justice system would be seriously jeopardized if there were no on-going formalized judicial education programs. 10. Legal authorization: State Constitution Article, RCW, WAC or EO 11. Legal Authorization is: WA State Supreme Court 11. Legal Authorization is: Specific Seneral 12. Appointing Authority: Chief Justice Supreme Court 							
14. Does group have subpo	oena powers? []Yes ⊠ No 1	5. Group memb	oer compensation class	one two three four five		
	pellate Judges (erks (1), Court /	Administrator (1),	Juvenille Cou	rt Administrator (1), At	Deans (1), Superior Court torney Judges (2), Non-Attorney		
17. Federal or other mand N/A	 Federal or other mandates: N/A 102. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: N/A 						
19. Certification: I hereby of knowledge.	certify via electro	onic submittal that	the above infor	mation is complete and	correct to the best of my		
Janet McLane, Director Judicial Services Division		6/30/01		ox 41170, Olympia, W			
Name and Title (This	person assume	Date s responsibility fo	Addre or accurate tran	ess nsmittal of the above ir	Phone formation)		

Court Management Council			"Uncha	"Unchanged"			
1. Group Name			2. Nam	e group reported under in 199	99 or Unchanged □		
Supreme Court			1987	15	16		
3. Agency to which group re	eports		r was group iblished	5. Number of members	6. Number of meetings last biennium		
7. Summary: Primary Resp	onsibilities:						
				ters affecting administration uating legislative matters afform			
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation		
1999-2001 Biennium Group Program	\$9,882		\$9,882	PSEA/A			
2001-2003 Biennium Group Program	\$12,000		\$12,000	PSEA/A			
94. Expected consequence transferred to another ag) were assigned to existing/ad	Iditional staff, b) were		
a) Non-adherence to co	ourt order	b)		c)			
10. Legal authorization: St	ate Constitution	n Article, RCW, WA	AC or EO	11. Legal Authorization i	is:		
Supreme Court Order	•			⊠ Specific ☐ Gene	ral		
12. Appointing Authority: (Chief Justice S	upreme Court		13. Is Senate confirmation re	equired? 🗌 Yes 🔀 No		
14. Does group have subpo	ena powers?	Yes 🛛 No 1	5. Group memb	er compensation class 🛚 one	e		
16. Required Representatio	n:						
Washington State Asso	ociation for Cou	urt Administration	, Association o	Washington State Association of Washington Superior Court ne Appellate Courts, Adminis	Administrators,		
17. Federal or other manda	ates:			xisting organizations state, lo			
N/A							
			N/A				
19. Certification: I hereby of knowledge.	ertify via electro	onic submittal that	the above infori	mation is complete and correct	to the best of my		
Janet McLane, Director		6/30/01	РО В	ox 41170, Olympia, WA 9850	360-705-5305		
Judicial Services Division Name and Title		Date	Addre	SS	Phone		

Cranberry Commission	n						
1. Group Name			2. Nan	ne group reported under in 1999	9 or Unchanged ⊠		
Department of Agriculture		1	980	8	4		
Department of Agriculture 3. Agency to which group r			r was group	5. Number of	6. Number of meetings		
		esta	ablished	members	last biennium		
7. Summary: Primary Resp	onsibilities:						
Collects assessments fr weeds and other proble				roduction methods, control of o growers.	diseases, insects,		
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation		
1999-2001 Biennium Group Program	\$213 \$63,200	\$200 0	\$413 \$63,200	Grower assessments and industry grants/N			
2001-2003 Biennium Group Program	\$703 \$28,000	\$1,980 0	\$2,683 \$28,000*	Grower assessments and industry grants/N			
transferred to another ag	ency (specify),	or c) were dropped	d.	a) were assigned to existing/add			
a) Producer support ar involvement would o			igricultural proç be transferred.	would de efforts ar	of research activities affecting research at the economic viability dustry in Washington.		
10. Legal authorization: S	tate Constitutio	n Article, RCW, WA	AC or EO	11. Legal Authorization is	s:		
RCW 15.65 and WAC	16-565			⊠ Specific ☐ Gener	ral		
12. Appointing Authority: To by the Director of Agricultum		fected producers,	1 appointed	13. Is Senate confirmation re	quired? ☐ Yes 🗵 No		
14. Does group have subpo	ena powers? [⊠ Yes ☐ No 1	5. Group memb	per compensation class 🗌 one	⊠ two ☐ three ☐ four		
16. Required Representation	n:						
District 3: Remainder	Pacific and Gr of state - 1 me	ays Harbor countien mber	es between Wi	llapa and Chehalis Rivers - 4 e Department and the public	members		
17. Federal or other mand	7. Federal or other mandates: 104. Other existing organizations state, local or private, which could						
None		satisfy the mandates listed in number 17: None					
19. Certification: I hereby of knowledge.	certify via electr	onic submittal that	the above infor	mation is complete and correct	to the best of my		
Jack Stein, Secretary/Trea	asurer	7/15/01		ox 597, Grayland, WA 98547			
Name and Title		Date	Addre	ess	Phone		

^{*}Reduction is due to 65% volume regulation this year and no matching grants/funds from Ocean Spray.

(This person assumes responsibility for accurate transmittal of the above information)

Crime Victims Compe Committee	nsation Progr	am Advisory					
1. Group Name			2. Name group reported under in 1999 or Unchanged ⊠				
Department of Labor & Inc	dustries		1993	20	5		
3. Agency to which group r		ar was group ablished	5. Number of members	6. Number of meetings last biennium			
7. Summary: Primary Resp	onsibilities:						
To advise CVC Progran	n of legislative, f	iscal, and policy	issues.				
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation		
1999-2001 Biennium Group Program	\$1,150		\$1,150	PSEA/A	N/A		
2001-2003 Biennium Group Program	\$1,150		\$1,150	PSEA/A	N/A		
96. Expected consequence transferred to another ag				a) were assigned to existing/a	additional staff, b) were		
a) Stakeholder feedbac suffer. Advice and recommendations re these advocates wo	eceived from) Same as "a	a"	c) Same	as "a"		
10. Legal authorization: St	tate Constitution	Article, RCW, W	AC or EO	11. Legal Authorization	ı is:		
N/A				☐ Specific ☐ Ger	neral		
12. Appointing Authority:	N/A			13. Is Senate confirmation	required? 🗌 Yes 🔀 No		
14. Does group have subpo	pena powers? 🗌	Yes ⊠ No 1	l5. Group memb	per compensation class 🛛 o	ne		
16. Required Representation	n:						
Represents a group or	agency that wo	rks with victims	or represents I	aw enforcement.			
17. Federal or other mand	ates:			existing organizations state, l			
N/A			N/A				
19. Certification: I hereby of knowledge.	certify via electror	nic submittal that	the above infor	mation is complete and correc	ct to the best of my		
Cletus Nnanabu, Program Victims Compensation	ı Manager, Crim	e 6/7/01	Crime PO B	artment of Labor & Industries e Victims Compensation Pro Box 44520 apia, WA 98504-4520			
Name and Title (This)	person assumes	Date responsibility for	Addre		Phone ation)		

Criminal Justice Trair	ning Commis	ssion					
1. Group Name			2. Nan	ne group reported under in 199	9 or Unchanged 🛚		
Same			1974	14	8		
3. Agency to which group r	eports		ar was group ablished	5. Number of members	6. Number of meetings last biennium		
disputes brought to it, for	ves any WAC unctions as a dustice entities,	which pertains to lecision maker in	the working of matters of adm	the agency, hires the Executi inistrative waivers, establishin Commission as the staff carry	ve Director, resolves any ng minimum standards		
8. Estimated Operating Costs	Direct Costs	Indirect Costs	Total Costs	Sources of Funds Enter fund sources, e.g., G.F. State/A if appropriated or N if non appropriated	Program Appropriation		
1999-2001 Biennium Group Program	22,000 13,408,000	0 5,000,000	22,000 18,408,000	PSEA - State/A PSEA - State/A PSEA - Federal/A GF- State/A Death Investigations- State/A MCJAA- State/A			
2001-2003 Biennium Group Program	22,000 14,000,000	0 5,350,000	22,000 19,350,000	PSEA - State/A PSEA - State/A PSEA - Federal/A Death Investigations- State/A MCJAA - State/A			
97. Expected consequence transferred to another ag				a) were assigned to existing/ad	lditional staff, b) were		
agency which serves t							
10. Legal authorization: S RCW 43.101.020	tate Constitutio	n Article, RCW, W	AC or EO	11. Legal Authorization i ⊠ Specific ☐ Gene			
12. Appointing Authority:	Governor			13. Is Senate confirmation re	equired? 🗌 Yes 🗵 No		
14. Does group have subpo	oena powers? [☐ Yes ⊠ No 1	15. Group memb	per compensation class 🗌 one	two three		
agency and one from a n correctional system, incu	and two incumbe nunicipal agency mbent county pr	, one person emplo osecuting attorney o	yed in a county cor municipal attor	e level of first line supervisor from correctional system, one person e mey, one elected official of a loca the Federal Bueau of Investigation	a county law enforcement employed in the state al government, one private		
17. Federal or other mand None	ates:	106. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: None					
19. Certification: I hereby a knowledge.	certify via electr	onic submittal that	the above infor	mation is complete and correct	to the best of my		
Michael D. Parsons, Exec	cutive Director	June 29, 2		0 1 st Ave. S., Seattle, WA. 98			
Name and Title		Date	Addre	ess	Phone		